

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO. 091763204 FILING DATE 20 FEB 2001

APPLICANT(S)

*Clermudy*

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
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TOTAL IND.	/					
TOTAL DEP.	5	↓	↓	↓		
TOTAL CLAIMS	6	↓	↓	↓		

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TOTAL IND.						
TOTAL DEP.		↓	↓	↓		
TOTAL CLAIMS		↓	↓	↓		